

**Derbyshire Joint Area Prescribing Committee (JAPC)**

This is a countywide group covering NHS North Derbyshire, South Derbyshire, Hardwick and Erewash clinical commissioning groups, Derbyshire Community Health Services Trust, Derbyshire Healthcare Foundation Trust, Derby and Chesterfield Royal Hospitals. It provides recommendations on the prescribing and commissioning of drugs.

See <http://www.derbyshiremedicinesmanagement.nhs.uk/home>

**KEY MESSAGES FROM THE JAPC APRIL 2014 MEETING**

**CLINICAL GUIDELINES ([LINK](#))**

The nebuliser guideline for COPD has been updated and reflects a service that now covers all of Derbyshire. All routine requests for a nebuliser should be sent to the relevant community respiratory team for assessment and initiation where appropriate. Patients on nebulisers, who have never had a formal assessment and where clinical appropriateness is in question can also be referred into this service. The guideline includes a patient information leaflet, referral forms and information on the provision of equipment to care homes and palliative care referrals.

**SHARED CARE ([LINK](#))**

**None**

**THERABITE BITE PADS – GREEN FOLLOWING SPECIALIST INITIATION**

Therabite is a mechanical stretching device used to treat trismus following head and neck cancer treatment. The supply to the patient and training on the device remains the responsibility usually of speech and language specialist. The device has previously been classified as RED to reflect the training required, monitoring of initial adherence to the training regimen and acquired benefit. Over longer term use the replacement bite pads can be supplied and prescribed by GPs. A set of 4 replacement pads are expected to last around 6 months.

**TAMSULOSIN 400MCG+ SOLIFENACIN 6MG (VESOMNI) – BLACK**

The use of an alpha blocker plus an anticholinergic is a recognised treatment but has a limited role in the treatment of lower urinary tract symptoms ([NICE CG97](#)). This is the first combination formulation of alpha blocker and anticholinergic, and is cheaper than its individual components. JAPC however recognises more cost effective choices than both solifenacin and tamsulosin are on the local formulary and so could not endorse the use of this product.

**BLEPHACLEAN AND OTHER SIMILAR STERILE WIPES – BLACK**

GPs are being requested to prescribe sterile wipes by optometrists to manage blepharitis. This is not an effective use of NHS resources. Patients should be advised to control symptoms through self-care measures with good eyelid hygiene. Optometrists across Derbyshire are being informed of the decision.

**CO-PROXAMOL – BLACK**

Prescribing data shows the use of co-proxamol has reduced significantly and the reclassification of co-promaxol from Brown to Black reflects JAPCs view of its poor safety profile and a further prompt for GPs to review existing use in patients.

**DEBRISOFT – RED**

The Debrisoft monofilament debridement pad for use in acute or chronic wounds has been classified as red following a positive NICE [Medical Technology Guidance](#) (unlike NICE technology appraisals these are non-mandatory). Its restriction applies primarily for the use by tissue viability nurse specialists. JAPC applied this restriction to reflect not only the weak and limited evidence but the importance of right patient selection to make its use cost effective.

**PRINCIPLES TO DETERMINE JAPC TRAFFIC LIGHT CLASSIFICATION FOR MEDICAL DEVICES AND APPLIANCE WHICH MAY BE PRESCRIBED ON FP10**

JAPC has agreed on a [framework](#) to inform its decision making process of medical devices. The framework includes the decision tools for inclusion or exclusion into formulary and its position in the healthcare setting. Prescribers are reminded that medical devices already assessed can be found in the [Full Traffic Light Classification](#) database.

Drug	BNF	Date considered	Decision	Details
TheraBite bite pads	Not listed	April 2014	<b>GREEN</b> (following specialist initiation)	Green following specialist initiation. Treatment of trismus following head and neck cancer therapy Note: device classification of RED
Aflibercept in combination with irinotecan and fluorouracil	Not listed	April 2014	<b>BLACK</b>	In line with NICE TA 307-Aflibercept in combination with irinotecan and fluorouracil-based therapy <b>is not recommended</b> within its marketing authorisation for treating metastatic colorectal cancer that is resistant to or has progressed after an oxaliplatin containing regimen
Rituximab in combination with glucocorticoids	8.2.3	April 2014	<b>RED</b>	In line with NICE TA 308-Rituximab in combination with glucocorticoids for treating antineutrophil cytoplasmic antibody-associated vasculitis
Debrisoft	A5.5.3	April 2014	<b>RED</b>	NICE MTG17- The Debrisoft monofilament debridement pad for use in acute or chronic wounds
Tamsulosin +solifenacin combination (Vesomni)	7.4	April 2014	<b>BLACK</b>	The only combination of anticholinergic + alpha blocker available; but cheaper single formulary component alternatives are available
Co-proxamol	4.7.1	April 2014	<b>BLACK</b>	Existing patients on treatment should be reviewed with a view to switching/stopping and continued use only allowed by exception. No new patients should be initiated.
Blephaclean and sterile wipes for eyelids	Not listed	April 2014	<b>BLACK</b>	Blepharitis management symptoms can usually be controlled with adequate self-help measures

#### Derbyshire Medicines Management, Prescribing and Guidelines website

This website is the first port of call for information on local NHS decisions and guidance on medicines use. It includes: local prescribing formularies, JAPC decisions, traffic lights, shared care guidelines, medicines guidelines, newsletters, controlled drug resources, and other medicines management resources. The site improves upon previous sites in several ways. It is faster, more reliable, has its own search engine, and it is easier to find information. Content is constantly being updated and you can sign up for e-mail alerts to keep you up to date.

- RED** drugs are those where prescribing responsibility lies with a hospital consultant or a specialist.
- AMBER** drugs are those that although usually initiated within a hospital setting, could appropriately become the responsibility of the GP, under a shared care agreement.
- GREEN** drugs are regarded as suitable for primary care prescribing.
- BROWN** drugs are those that JAPC does not recommend for use, except in exceptional circumstances, due to lack of data on safety, effectiveness, and/or cost-effectiveness.
- BLACK** drugs are not recommended or commissioned